THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) No, Sir.This Ministry has not organized or funded any such conference in November, 2002 in Delhi.

Inclusion of private doctors inTB Control Programme

† 526. SHRIMATI KUM KUM RAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether private doctors are also proposed to be included in the TB Control Programme;

(b) if so, the details thereof; and

(c) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Yes, Sir. Under Revised NationalTB Control Programme (RNTCP), guidelines have been evolved for involvement of private doctors to increase the access to TB care services in the country. Private Practioners (PPs) can involve themselves in the implementation of RNTCP through the concerned District TB Control Society through following schemes:—

1. Referral of patients.

2. Provision of Directly Observed Treatment.

3. Designated microscopy centres set up for microscopy only or for both microscopy and treatment for which commodity assistance/ commodity and financial assistance is provided.

Increase in mentally ill patients in Orissa

527. SHRI B.J. PANDA:
SHRI RAMCHANDRA KHUNTIA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there has been unabated increase in the number of mentally ill patients in all the districts of Orissa as reported in the New Indian Express, dated 19th December, 2002;

(b) if so, the reasons therefor; and

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† Original- notice of the question was received in Hindi.

(c) the help rendered by the Central Government to the State Government to control this meanace?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c)The Central Government has no specific information relating to the increase in the number of mentally ill patients in Orissa as reported in the New Indian Express, dated 19th December, 2002. However, the number of persons with mental illness is increasing due to changes in demographics such as increase in population and over all increase in the rate of depression world-wide. The Government has been undertaking programmes on mental heatth and has formulated National Mental Health Programme for implementation during the 10th Five Year Plan to promote mental health care throughout the country.

Expenditure on Health

528. DR. MANMOHAN SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the latest estimate of public sector expenditure on health;

(b) whether Government have committed itself to raising the public expenditure on health to 2 per cent of GDP; and

(c) if so, the concrete steps envisaged during the Tenth Five Year Plan?

THE MINrSTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) As per the World Health Report, 2002 the Government spends 17.8% out of the total expenditure on health. It is envisaged in the National Health Policy-2002 to increase public health expenditure from 0.9% of GDP to 2% of GDP by the year 2010.

(c) Government is making all efforts to increase expenditure on health in line with the NHP-2002, subject to overall financial constraints. Substantial external assistance is being mobilised through various bilateral and multilateral agencies for the implementation of various disease control programmes. State Health System Project with World Bank assistance aimed at improving and upgrading the secondary level health care facilities is presently under implementation in seven States.